

## ISSUE SLIP STAMP (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
<b>FEES DETERMINATION</b>			
<b>O.I.P.E. CLASSIFIER</b>			2481
<b>FORMALITY REVIEW</b>			10-10-1981
<b>RESPONSE FORMALITY REVIEW</b>			

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final	Original
1 ✓	1/11/81
2 ✓	1/11/81
3 ✓✓	
4 ✓✓	
5 ✓✓	
6 ✓✓	
7 ✓✓	
8 O	
9 ✓✓	
10 O O	
11 ✓✓	
12 ✓✓	
13 ✓✓	
14 ✓✓	
15 ✓✓	
16 ✓✓	
17 ✓✓	
18 O O	
19 O O	
20 O O	
21 O O	
22 ✓	
23 ✓	
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25 ✓	
26 ✓	
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28 ✓	
29 ✓	
30 ✓✓	
31 O O	
32 ✓✓	
33 O O	
34 ✓✓	
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36 ✓	
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40 ✓	
41 ✓	
42 ✓✓	
43 O O	
44 ✓✓	
45 O O	
46 ✓✓	
47 ✓✓	
48 ✓✓	
49 ✓✓	
50 ✓✓✓	

Claim	Date
Final	Original
51 ✓✓	1/11/81
52 ✓✓	
53 ✓✓	
54 ✓✓	
55 ✓✓	
56 ✓✓	
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58 ✓	
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60 ✓	
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Claim	Date
Final	Original
101 ✓	
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142 ✓	
143 ✓	
144 ✓	
145 ✓	
146 ✓	
147 ✓	
148 ✓	
149 ✓	
150 ✓	

BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

(LEFT INSIDE)

9/29/81 P3